

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jahangir S. Rastegar **Examiner:** Unassigned
Serial No: 10/733,679 **Art Unit:** Unassigned
Filed: December 11, 2003 **Docket:** 15788ABCEF
For: STRUCTURAL ELEMENTS **Dated:** January 5, 2004

Commissioner for Patents
P. O. Box 1450
Arlington, VA 22313-1450

SUPPLEMENTAL PRELIMINARY AMENDMENT

Sir:

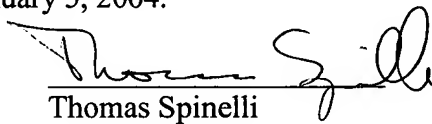
Prior to examination, please amend the above-identified divisional application as

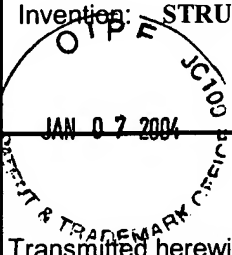

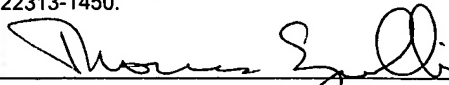
follows:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, Box 1450, Arlington, VA 22313-1450 on January 5, 2004.

Dated: January 5, 2004


Thomas Spinelli

AMENDMENT TRANSMITTAL LETTER (Small Entity)			Docket No. 15788ABCEF		
Applicant(s): Jahangir S. Rastegar					
Serial No. 10/733,679	Filing Date December 11, 2003	Examiner unassigned	Group Art Unit unassigned		
Invention: STRUCTURAL ELEMENTS					
 TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013 SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: January 5, 2004		
Thomas Spinelli, Reg. No. 39,533 Customer No. 23389			<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on 1/5/04 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Signature of Person Mailing Correspondence Thomas Spinelli Typed or Printed Name of Person Mailing Correspondence </div>		
CC:					